



**APHIS**  
**PARTNERSHIP IN EDUCATION PROGRAM**  
**2008-2009**  
**PARTICIPATION FORM**  
**FOR HEADQUARTERS PARTNER SCHOOLS**

**PART A ~ WHO YOU ARE AND WHAT YOU HAVE TO OFFER**

Please print the following information:

Name: \_\_\_\_\_ Program: \_\_\_\_\_ Unit #: \_\_\_\_\_

Occupation: \_\_\_\_\_ Phone: \_\_\_\_\_

Special Skills You'd Like to Share: \_\_\_\_\_

\_\_\_\_\_

Interests/Hobbies: \_\_\_\_\_

\_\_\_\_\_

**PART B ~ EXTENT OF YOUR PARTICIPATION AND AVAILABILITY**

1. Yes, I'd like to volunteer in the Program as a: \_\_\_\_Mentor \_\_\_\_Tutor \_\_\_\_Either

2. I'd like to share a student with another employee:

A. My APHIS co-mentor/tutor is: \_\_\_\_\_

B. \_\_\_\_ Please assist me with finding someone with whom to share a student.

3. I would like to volunteer at the following school:

\_\_\_\_ Hyattsville Elementary School (HES)

\_\_\_\_ Hyattsville Middle School (HMS)

\_\_\_\_ Northwestern High School (NHS)

\_\_\_\_ Wherever I am most needed

4. I am a returning mentor/tutor and would like to return to the same school as last year:

\_\_\_\_ HES

\_\_\_\_ HMS

\_\_\_\_ NHS

5. As a returning mentor/tutor, I would like to work with the same student(s):  
Student Name(s): \_\_\_\_\_
6. I am a new volunteer who was recruited by \_\_\_\_\_  
Employee Recruiter's Name
7. I have discussed this with my supervisor and he/she concurs with my participation.  
Supervisor's Signature: \_\_\_\_\_  
Supervisor's Name Printed: \_\_\_\_\_

**Please complete this form and return to:**

**Susan Murphy**

**Unit 89**

**Phone 301-734-0662**

**FAX 301-734-0767**

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